01-11-06



Atty. Dkt. No. 062287-3600

UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Thomas A. SILVESTRINI

Title:

CORNEAL IMPLANT

METHODS AND PLIABLE

IMPLANT THEREFOR

Appl. No.:

08/993,946

Filing Date:

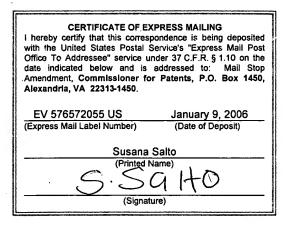
12/18/1997

Examiner:

Willse, David H.

Art Unit:

3738



AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [${\bf X}$] The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | | Extra Claims Present | | Rate | | Additional Claims Fee |
|---------------------|-------------------------|-----|------------------------|-----|----------------------------|---|---------------------|---|--------------------------|
| Total Claims: | 14 | _ | 25 | = | 0 | X | \$50.00 | = | \$0.00 |
| Independent Claims: | 1 | - | 6 | = | 0 | X | \$200.00 | = | \$0.00 |
| First pres | entation of a | any | Multiple De | pen | dent Claims: CLAIMS | | \$360.00 E TOTAL | = | \$0.00 \$0.00 |

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

| [X] Ex | Extension for response filed within the first month: \$120.00 | | | | | |
|--------|---|--|----------|--|--|--|
| | EXTENSION | EXTENSION FEE TOTAL: | | | | |
| [] St | tatutory Disclaimer Fee under 37 C.F.R. 1.20(d): | \$130.00 | \$0.00 | | | |
| | CLAIMS, EXTENSION AND DISCLAIMER | FEE TOTAL: | \$120.00 | | | |
| [X] | Small Entity Fees Apply (subtract | Small Entity Fees Apply (subtract ½ of above): | | | | |
| | | TOTAL FEE: | \$60.00 | | | |

[X] A check in the amount of \$60.00 is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: January 9, 2006

FOLEY & LARDNER LLP Customer Number: 38706 Telephone: (650) 251-1129 Facsimile: (650) 856-3710 Antoinette F. Konski Attorney for Applicant Registration No. 34,202